FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076
Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT

[Please read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Information	on									ŀ					
1. Name and Mailing Address of Respondent S&T Telephone Cooperative Association 320 Kansas Ave, PO Box 95 Brewster, KS 67732	Respondent Ooperat OO Box	ive Asso 95	ciation										Che is a	Check here if this is a change of address.	Y 1
 Year Report Filed 2018 		3. Reportin Period C 12/3(Reporting Period (Ending Date of Pay Period Covered by Report) 12/30/2018	ling Date of P. port)	ау		4. Number Reporting a. Fe	4. Number of Full-Time Employees during Selected Reporting Period (check one): a. Fewer than 16 (complete Sections I, IV, and V only) b. 16 or more (complete all sections)	mployees du k one): complete Sec	ring Selected tions I, IV, an	d V only)				
SECTION II - Full-Time Employees.	es.									,					
							Num (Report empl	Number of Employees (Report employees in only one category)	yees one category						12
Job								Race/Ethnicity	,						
Categories	Hisp	Hispanic or Latino		-				Not-Hispanic or Latino	ic or Latino						Total
					Male	ale					Female	nale			Columns A - N
	Male	Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific Islander	Asian	American Indian or Alaska Native	Two or more races	
	⊳	В	С	D	Е	Ŧ	6	н	-	د	*	г	Z	z	0
Officials and Managers 1.1			2						3						5
Managers 1.2			3					,	2						5
Professionals 2			1												1
Technicians 3			9												9
Sales Workers 4			1						2						3
Administrative Support 5 Workers		1	1						13						15
Craft Workers 6	2		6												∞
Operatives 7															0
Laborers and Helpers 8			3												3
Service Workers 9															0
TOTAL 10	. 2		26	0	0	0	0	0	20	0	0	0	0	0	49
PREVIOUS YEAR TOTAL 11															0

Job Categories	mploye	Mal	Hispanic or Latino e Female	White	Black or African American	Native Hawaiian or Other Pacific Islander	Male Asian	Nu (Report em) (Re	Number of Employees (Report employees in only one category) Race/Ethnicity Not-Hispanic or Latino Not-more Not more Not	er of Employees ees in only one categor ace/Ethnicity Not-Hispanic or Latino wo or more races White	Black or African American	Fer Native Hawaiian or Other Pacific Islander	Female Asian	American Indian or Alaska Native	Two or more races
		Þ	В	С	0	Е	П	G	I	-	_	7	_	Z	
Executive/Senior Level Officials and Managers	1.1														
First/Mid-Level Officials and Managers	1.2														
Professionals	2														
Technicians	ω	10.7													9
Sales Workers	4	7						,							
Administrative Support Workers	ڻ ن														
Craft Workers	6														
Operatives	7							7							
Laborers and Helpers	00														
Service Workers	9														
ТОТАL	10	0	0	0	0	0	0	0	0	0	0	0	0	0	
PREVIOUS YEAR TOTAL	1														
-	rimina:	tion Compl nmission th	laints Pursuar	nt to 47 CFR	22.321, 23.58	5, 90.168, 101	.4, and 101.	311.	ral state terr	itorial or loop					-
This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report. This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have been filed against this company. (Attach a list indicating parties involved, date filed, courts or agencies before which the matter has been heard, file number or other designation, and current status or disposition. SECTION V - Certification	the Con any boc the Con cating p	nmission that y having control that the having control that arties involves	at no complain ompetent jurisc at the following ved, date filed,	ts regarding viction in such complaints a courts or age	violations of the matters during matters during violating violations before	ne equal empl ng the calenda ions of the pro which the ma	ar year cover visions of an	sions of Fede ed by this rep y equal emple heard, file nu	ort. ort. oyment oppor imber or othe	itorial, or loca tunity statute r designation,	I statutes have been fill and current s	statutes have been filed against this are been filed against this company ave been filed against this company and current status or disposition.	gainst this company.		
Certify that to the best of my knowledge, information, and belief, all statements in this report are true and correct. Date Tryped or Printed Name of Person Storing Tryped or Printed Name of Person Storing	knowled	ge, informa	ltion, and belie	f, all statemer	nts in this rep	ort are true ar	nd correct.								
20/2019	Hea	or Printed N	Heather McDonald	n Signing			Signature	nn	2	7			Telephone No. (785) 69	785) 694-2256	0
Human Resources Officer	Offi	cer			MILLFULLY F	TION LICENS	EMENTS MA	DE ON THIS	FORM ARE F PERMIT (47 U	UNISHABLE I.S.C. 312 (A)	BY FINE AN (1) AND/OR	WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).	ONMENT (18 (47 U.S.C. 5	3 U.S.C. 10(03).	3